

DR 8453 (10/12/17) COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0005 Colorado.gov/Tax

State of Colorado Individual Income Tax Declaration for Electronic Filing Do not mail this form to the IRS or the Colorado Department of Revenue Retain with your records

| | | | 0.0.0 2 0 | P | ••••••• | | | | | |
|---|--|---|--|---|---|---|--|---|---|---|
| Тахрау | /er SSN | Spouse SSN (If Joint | Return) | | Submissior | n ID | | | | |
| 679-2 | 2-4952 | | | | | | | | | |
| Тахрау | ver Last Name | | | Taxpayer Fire | st Name | | | | Midd | lle Initial |
| GONG | ATI | | N | IAGARJUN | A YADAV | | | | | |
| Spouse | e Last Name (If Joint Return) | | : | Spouse First | Name (If Joi | nt Retu | rn) | | | |
| | | | | | | | | | | |
| Street | Address | | | | | | Phone | Number | | |
| 325 | 7 SOUTH PARKER RD | | | | | | | | | |
| City | | | | | | | State | Zip | | |
| AUR | ORA | | | | | | CO | 80014-3 | 0014-3239 | |
| | | Part I — Ta | | | | I | | | | |
| | al Income, line 22 from your fond the second s | ederal form 1040, li | ne 15 on | form 1040 | DA, | 1 | \$ | : | 29686 | |
| | able Income, line 43 on feder | al form 1040, line 2 | 27 on forr | m 1040A, | | - | ^ | | | |
| line | 6 on form 1040EZ | | | | | 2 | \$ | | 19286 | |
| 3. Col | orado Tax, Line 15 on Colora | do form 104 | | | | 3 | \$ | | 891 | |
| 4. Col | orado Tax Withheld, Line 16 d | on Colorado form 1 | 04 | | | 4 | \$ | 1215 | | |
| 5. Refund, Line 30 Colorado form 104 5 | | | 5 | \$ | \$ 324 | | | | | |
| C A | | | | | | 0 | ¢ | | | |
| b. Am | ount You Owe, Line 35 on Co | Part II — De | claratio | on of Tax | k Paver | 6 | \$ | | | |
| with the are true applica | penalties of perjury, I declare that e amounts shown on my 2017 Fed e, correct, and complete to the b ble) may be required to provide equest by the Colorado Departme | leral/Colorado income lest of my knowledge paper copies of this d | tax return and belie eclaration | s, and that s f. I understa , my returns | aid tax retur and that I (o , withholdin | ns, stat r my E g state | ements lectroni ments, | , schedules c Return Or schedules, a | and attach iginator (E and attach | nments ERO) if |
| Signatu | Ire | Date | | Spouse's S | ignature (If J | oint Ret | urn, Bot | h Must Sign) | Date | |
| | | | | | | | | | | |
| | Part I | II — Declaratio | n of ER | O/Prepa | arer/Trar | nsmit | ter | | | |
| lf the t | ransmitter did not prepare the | e tax return, check | here |] | | | | | | |
| Colorad Colorad amount best of have pl covered | not the preparer, I declare only that do income tax returns. If I am the p do income tax returns and that the ts shown on said tax returns, and my knowledge and belief. As prep- rovided the taxpayer with copies of d by the Colorado statute of limitat achments upon request by the Co | preparer, under penaltion information provided that said tax returns, s arer, I further declare th of all forms and inform ions, and to provide pa | es of perju to me by f statements hat I have ation filed. aper copies | ry I declare t the taxpayer s, schedules, obtained the I also agree s of this decl | that I have re and the am and attache taxpayer's set o maintair aration, said | eviewed nounts s ments a signatur n this si d return eriod. | d the ab shown in are true, re on thi igned Fo s, withh | ove taxpaye n Part I abov , correct, and s form at the orm (DR 845 olding stater | r's 2017 F ve agree v d complete time of fili 53) for the nents, sch | ederal/ vith the e to the ing and period nedules |
| ERO's | Signature | | | | | Prep | arer Ider | ntification Nur | nber or Yo | ur SSN |
| APPA | NA RUPA VENKATA SATYA | SAI MANI KUMAN | R | | | P | 02090 | 332 | | |
| | Chaok if also Droporor | | | | | Date | (MM/DD/) | (Y) | | |
| | Check if also Preparer X | l | | | | | 06/07 | //18 | | |





DR 0104 (06/30/17) COLORADO DEPARTMENT OF REVENUE Colorado.gov/Tax (0013)

2017 Colorado Individual Income Tax Return

x Full-Year

Part-Year or Nonresident (or resident, part-year, non-resident combination) *Must attach DR 0104PN Mark if Abroad on due date – see instructions

| Your Last Name | | <u> </u> | Your First | Nam | e | | | | | | | Middle | Initial |
|--|---|-----------------|------------|---------|------------------------------|----------|-----------------|------------------------|---------|------------|-----------|--------|---------|
| GONGATI | | : | NAGARJ | JUNZ | A YZ | ADAV | | | | | | | |
| Deceased | | l. | | C | Date of | of Birth | (MM/DD/YYYY) | | | SSN | | | |
| | If checked and claiming a submit the DR 0102 with y | | ust | | 08/ | 02/1 | 992 | | | 679-2 | 2-49 | 52 | |
| Enter the foll | owing information from your | current driver | State of | Issue | ue Last 4 characters of ID n | | ID nu | number Date of Issuand | | lssuand | e | | |
| Enter the following information from your current driver license or state identification card. | | | CO | | 9114 | | | 01/08/ | | L/08/ | 18 | | |
| If Joint, Spouse's | Last Name | S | Spouse's F | First I | Nam | e | | | | | | Middle | Initial |
| | | | | | | | | | | | | | |
| Deceased | | | | S | Spou | se's Da | te of Birth (MN | //DD/Y | (YY) | Spouse' | s SSN | | |
| | If checked and claiming a submit the DR 0102 with y | | ust | | | | | | | | | | |
| Entor the foll | owing information from your | | State of | Issue | e | Last 4 | characters of | ID nu | ımber | Date of | lssuand | e | |
| current drive | r license or state identification | n card. | | | | | | | | | | | |
| Mailing Address | | | | | | | | | Phor | ne Numb | er | | |
| 3257 SOUTH | I PARKER RD | | | | | | | | | | | | |
| City | | | S | tate | Zip | Code | | Fo | reign (| Country (i | if applic | able) | |
| AURORA | | | CC | С | 80 | 014-3 | 3239 | | | | | | |
| | | | | | | | | - | | Round | To The | Next | Dollar |
| | eral Taxable Income from yo | ur federal inco | ome tax | forr | n: 10 | 040EZ | | | | | | | |
| | 0A line 27, 1040 line 43 | | | | | | • 1 | | | | | 1928 | 600 |
| - | nd 1099s with CO withholdir | ng here. ◀ | | | | | | | | | | | |
| | Federal Taxable Income | | | | | | | | | | | | |
| | back, enter the state income | | n from yo | ourf | fede | eral for | | | | | | | |
| 1040 sche | dule A, line 5 (see instructio | ns) | | | | | • 2 | | | | | | 00 |
| 3. Other Add | itions, explain (see instructio | ons) | | | | | • 3 | | | | | | 0 0 |
| Explain: | | | | | | | | | | | | Γ | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |



| 1/0104 21555 | | |
|--|------------------------------|-------------|
| Name | | SSN |
| | | |
| NAGARJUNA YADAV GONGATI | | 679-22-4952 |
| A Subtotal aum of lines 1 through 2 | 4 | 19286 00 |
| 4. Subtotal, sum of lines 1 through 35. Subtractions from the DR 0104AD Schedule, line 18, you must | | 1928000 |
| DR 0104AD schedule with your return. | • 5 | 0.0 |
| | • 5 | 00 |
| 6 Colorado Taxable Incomo subtract line 5 from line 4 | • 6 | 19286 00 |
| 6. Colorado Taxable Income, subtract line 5 from line 4 Tax, Prepayments and Credits: full-year residents use DR 0104CR a | - 1 | |
| 7. Colorado Tax from tax table or the DR 0104PN line 36, you m | | |
| the DR 0104PN with your return if applicable. | • 7 | 89100 |
| 8. Alternative Minimum Tax from the DR 0104AMT, you must su | | |
| DR 0104AMT with your return. | • 8 | 00 |
| | • • | |
| 9. Recapture of prior year credits | • 9 | 00 |
| | • 5 | |
| 10. Subtotal, sum of lines 7 through 9 | 10 | 891 00 |
| 11. Nonrefundable Credits from the DR 0104CR line 39, the sum | | |
| cannot exceed line 10, you must submit the DR 0104CR with | | 0 0 |
| 12. Total Nonrefundable Enterprise Zone credits used – as calcul | | |
| or from the DR 1366 line 87, the sum of lines 11 and 12 cannot | | |
| you must submit the DR 1366 with your return. | • 12 | 00 |
| | • 12 | |
| 13. Net Income Tax, sum of lines 11 and 12. Subtract that sum fro | om line 10. 13 | 89100 |
| 14. Use Tax reported on the DR 0104US schedule line 7, you mu | | 0,01,01 |
| the DR 0104US with your return. | • 14 | 0.0 |
| | • 14 | 00 |
| 15. Net Colorado Tax, sum of lines 13 and 14 | 15 | 89100 |
| 16. CO Income Tax Withheld from W-2s and 1099s, you must su | | |
| and/or 1099s claiming Colorado withholding with your return. | | 121500 |
| | • 10 | 121500 |
| 17. Prior-year Estimated Tax Carryforward | • 17 | 00 |
| 18. Estimated Tax Payments, enter the sum of the quarterly payments | | |
| remitted for this tax year | • 18 | 00 |
| | • 18 | 00 |
| 19. Extension Payment remitted with the DR 0158-I | • 19 | 00 |
| 13. Extension Payment remitted with the DK 0150-1 | • 19 | 00 |
| | | |
| 20. Other Prepayments: DR 0104BEP DR 0108 | □ ● DR 1079 ● 20 | 00 |
| 21. Gross Conservation Easement Credit from the DR 1305G line | e 33. vou must | |
| submit the DR 1305G with your return. | • 21 | 00 |
| 22. Innovative Motor Vehicle Credit from the DR 0617, you must s | | |
| DR 0617 with your return. | • 22 | 0 0 0 |
| 23. Refundable Credits from the DR 0104CR line 8, you must sub | | - 00 |
| DR 0104CR with your return. | • 23 | 00 |
| | • 23 | |
| 24. Subtotal, sum of lines 16 through 23 | 24 | 1215 00 |
| 25. Federal Adjusted Gross Income from your federal income tax | | |
| 1040EZ line 4; 1040A line 21; 1040 line 37 | • 25 | 2968600 |
| | • 25 | 2200000 |
| 26 Overneyment if line 24 is greater than line 15 then subtract li | ne 15 from line 24 26 | 224 00 |
| 26. Overpayment, if line 24 is greater than line 15 then subtract li | | 32400 |
| 27 Estimated Tax Credit Corruforward to 2019 first quarter if an | | |
| 27. Estimated Tax Credit Carryforward to 2018 first quarter, if any | • 27 | 00 |



DR 0104 (06/30/17) COLORADO DEPARTMENT OF REVENUE Colorado.gov/Tax

| Name | | | | | SSN | |
|---|---------------------|-------------------|------------------------|-------------|--------------------|----------|
| NAGARJUNA YADAV GONGATI | | | | | 679-22-4952 |) |
| 28. Voluntary Contributions elected on the DR 01 submit the DR 0104CH with your return. | 104CH scheo | dule line 21, yo | ou must • 28 | | | 0.0 |
| 29. Subtotal, add lines 27 and 28 | | | 29 | | | 0 0 |
| 30. Refund, subtract line 29 from line 26 (see ins | tructions) | | • 30 | | | 32400 |
| Direct Routing Number 0 8 1 0 0 0 | 0 3 2 | Туре: Х | Checking | Savings | CollegeIr | vest 529 |
| Deposit Account Number 3 | 5 5 0 0 | 7 6 5 3 | 3 8 3 | | | |
| For questions regarding CollegeInvest direct de | eposit or to op | en an account, | visit CollegeInv | est.org o | r call 800-448-242 | 24. |
| 31. Net Tax Due, subtract line 24 from line 15, the | en add line 2 | 28 | 31 | | | 0.0 |
| 32. Delinquent Payment Penalty (see instructions | S) | | • 32 | | | 0 0 |
| 33. Delinquent Payment Interest (see instructions | | | • 33 | | | 0 0 |
| 34. Estimated Tax Penalty, you must submit the I (see instructions) | DR 0204 wit | n your return. | • 34 | | | 0 0 |
| 35. Amount You Owe, sum of lines 31 through 34 | 1 | | • 35 | | | |
| The State may convert your check to a one-time electronic banking transaction not be returned. If your check is rejected due to insufficient or uncollected funds | . Your bank account | | | | | |
| Third Party Designee | | | | | | |
| Do you want to allow another person to discuss this return and any other information related to this return with the Colorado Department of Revenue? | • 🗌 N | lo • 🗌 | Yes. Comple | ete the fo | bllowing: | |
| Designee's Name | | Phone Number | | | | |
| • | • |) | | | | |
| Sign Below Under penalties of perjury, I declare that to th | e best of my kn | owledge and belie | ef, this return is tru | ie, correct | _ | |
| Your Signature | | | | | Date (MM/DD/YY) | |
| | | | | | | |
| Spouse's Signature. If joint return, BOTH must sign. | | | | | Date (MM/DD/YY) | |
| | | | | | | |
| Paid Preparer's Name | | | | Paid Prep | parer's Phone | |
| GLOBAL TAXES LLC | | | | (678) | 965-9729 | |
| Paid Preparer's Address | City | | | State | Zip | |
| 2530 PEBBLE CREEK LN | CUMMING | 7 | | GA | 30041 | |

REV 12/15/17 PRO

If you are filing this return **with** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000**6** If you are filing this return **without** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000**5**

These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.

Colorado Information Worksheet

Keep for your records

2017

| Part I | -Personal | Information |
|--------|-----------|-------------|
| ιαιι | | mormation |

| Taxpayer: Last Name <u>Gongati</u> | Spouse: Last Name |
|--|---|
| First Name Nagarjuna Yadav | First Name |
| Middle Initial Suffix | Middle Initial Suffix |
| Social Security No 679-22-4952 | Social Security No. |
| Date of Birth <u>08/02/1992</u> | Date of Birth |
| Date of Death | Date of Death |
| Work Phone * Home Phone * | Work Phone * |
| | me phone number on government forms. |
| Address | |
| | State <u>CO</u> ZIP Code <u>80014-3239</u> |
| Foreign Province/County | |
| Foreign Country | |
| Check to confirm address information is correct | |
| Part II – Main Form | |
| Form 104: Part-Year Resident Filing | |
| Resident military service persons who serve may now file as a nonresident on their Col | - |
| Part III – Filing Status | · |
| | |
| X Single | |
| Married filing jointly | |
| Married filing separately | |
| Head of household Qualifying widow(er) | |
| Part IV – Other Information | |
| 2017 Federal Adjusted gross income | |
| Underpayment Penalty Calculation: 2016 Federal adjusted gross income (for Form 204) 2016 Colorado filing status (for Form 204) | |
| Check this box if you do not want to file Form 204 of Revenue to figure the underpayment penalty (se | and want the Colorado Department |
| Third Party Designee: | |
| Yes No Do you want to allow another person to discus If yes, enter the folowing: | ss your return with the CO Department of Revenue? |
| Designee's Name | |
| Designee's Phone Number | |

Farmer / Fisherman Calculation:

| Yes | |
|-----|--|
| | |
| | |

No

X Check Yes to calculate estimated taxes for the farmer/fisherman option.

Will the farmer/fisherman filer file and pay the full amount of tax on or before March 1?

Supporting Document Information:

If supporting documentation is required, How will it be submitted to the Revenue Department?

Submitting via mail with Form DR 1778 Uploading documents via the Colorado Revenue website

ProSeries pdf attachment option

Part V - Electronic Filing Information

New! State e-file disclosure consent:

By using a computer system and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's tax return to the Colorado Department of Revenue, as applicable by law.

Х

The state return will be filed electronically.

Electronic PDF Attachments

PDF's that you have selected to attach to your state e-file return are listed below.

| Description | Filename |
|-------------|----------|
| | |
| | |
| | |

EF Status Dates:

| Date return was EFiled | |
|---|--|
| Date return was accepted by the state | |
| Enter the date Form DR 0900 was given to client | |

Part VI - Direct Deposit and Electronic Funds Withdrawal Information

CAUTION: See tax help for refund expectation



Do you want to elect **direct deposit** of state tax refund? Do you want to elect **Electronic Funds Withdrawal** (Electronic Filing Only)?

If your client requests direct deposit or electronic funds withdrawal, fill out the information below.

| Name of Financial Institution | BANK OF AMERICA | | | | | | |
|--|--------------------------------------|--|--|--|--|--|--|
| Account type | Checking X Savings CollegeInvest 529 | | | | | | |
| Routing number | 081000032 | | | | | | |
| Account number | 355007653383 | | | | | | |
| Enter the payment date to withdraw the account above | | | | | | | |
| Enter the amount to withdraw from the account above | | | | | | | |
| | | | | | | | |

International ACH Transactions



X Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

Part VII – Paid Preparer Information

Enter the preparer's assigned initials from Preparer's Information Worksheet

Part VIII – Extension Status

If the Colorado tax return can't be filed by April 17, a 6-month automatic extension of time to file is allowed.

Yes No

X Will the tax return be filed after April 17?

Extended due date . . .

Note: An extension of time to file is not an extension of time to pay.

If the Colorado tax return can't be filed by April 17, will the taxpayer(s) be traveling abroad on April 17? Yes No

If yes, the automatic due date is June 15.

| Nagarjuna Yadav | Gongati | 679-22-4952 | Page 3 |
|-----------------|---------|-------------|--------|
| | | | |

COIW1202.SCR 12/05/17

Tax Payments Worksheet ► Keep for your records

| Name | Social Security Number |
|-------------------------|------------------------|
| Nagarjuna Yadav Gongati | 679-22-4952 |
| | |

Tax Payments for the Current Year

| | | State | | |
|------------------|---|-------|-------------|-------------|
| | | Date | e Payment | _ |
| 1 2 3 4 | First Payment | | | _ |
| 5 | Additional PaymentsPaymentPaymentPaymentPaymentPaymentPaymentPaymentPayment | | | - - - |
| 6 7 8 | Overpayment from previous year applied to current year | | 6 7 8 | - |

Income Taxes Withheld for the Current Year

| 9 | State withholding on Forms W-2 | 9 | 1,215. |
|------|--|------|--------|
| 10 | State withholding on Forms W-2G | 10 | |
| 11 | State withholding on Forms 1099-R | | |
| 12 a | State withholding on Forms 1099-MISC | 12 a | |
| | State withholding on Forms 1099-G | | |
| С | State withholding on Forms 1099-K | С | |
| 13 | Other state tax withholding | 13 | |
| 14 | Total income tax withheld | 14 | 1,215. |
| 15 | Date return will be filed and balance paid | 15 | |

OTHV0301.SCR 11/28/16